

UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)	: .	Gloria C. Li et al.	
Serial No.	:	09/750,410	Examiner: Jane Zara
Filed	:	December 28, 2000	Group Art Unit: 1635
For	:	USES OF DNA-PK	
			· · · · · · · · · · · · · · · · · · ·
Mail Stop An COMMISSIONER P.O. Box 145 Alexandria,	R F		Date: July 26, 2007
Sir:			
Transmitted	he	rewith is an amendme	ent to the above-identified application
<u> x</u>	C.	<u>-</u>	f this application under 37 27 has been previously

A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27

The filing fee is calculated as follows:

No additional fee is required.

enclosed.

	Number after Amend- ment		Highest Number Previously Paid For ¹		Number of Extra Claims Presented		RATE]	FEE	
							Small Other Entity Entity			Small Entity	Other Entity
Total			* 06		***						
Claims	8	-	26	=	0	X	\$25	\$50	=	0.00	
Indepen -dent Claims	2	-	4	=	***	х	\$100	\$200	=	0.00	
Multiple For Firs			t Claim Yes		esented _No	[\$180	\$360	=	0.00	
							TOTAL A	DDITIONA		\$ 0.00	

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER

AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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Amendment Tran Page 2	smittal Letter
The following	are also enclosed:
X One addi	tional copy of this Amendment Transmittal Letter
X Return R	eceipt Postcard
(Copies	mation Disclosure Statement, including Form PTO-1449 of citations included: Yesx No ee of \$ included)
	ion for an Extension of Time, including a fee of .00 for a Petition for 5 Month(s) Extension of Time
_x Other (i	dentify): \$395.00 Request for Continued Examination fee
. •	
THE TOTAL FEE	DUE IS \$ 1,475.00
x A check	in the amount of \$ 1,475.00 is enclosed.
Please ch \$	narge Deposit Account No in the amount of
X The Commi required as follow	ssioner is hereby authorized to charge any additional fees or credit any overpayment to Deposit Account No. 03-3125
X Fee:	s under 37 C.F.R. §1.16 for the presentation of extra claims ent application processing fees under 37 C.F.R. §1.17
	Respectfully submitted,
correspondence is date with the U.S.	ent Cooper & Dunnam LLP (Customer #23432) Patents 1185 Avenue of the Americas New York, New York 10036